

FISCAL YEAR 2006-07 COST PER ELIGIBLE BASED ON NOVEMBER 2006 ESTIMATE

SERVICE CATEGORY	PA-OAS	PA-AB	PA-ATD	PA-AFDC	LT-OAS	LT-AB
PHYSICIANS	\$36,580,970	\$8,486,790	\$337,211,180	\$67,575,790	\$7,216,000	\$106,640
OTHER MEDICAL	\$65,608,500	\$15,305,200	\$439,969,520	\$170,856,380	\$6,621,850	\$306,960
COUNTY OUTPATIENT	\$1,002,010	\$597,200	\$24,542,200	\$4,586,490	\$110,800	\$140
COMMUNITY OUTPATIENT	\$21,189,060	\$4,008,740	\$197,052,120	\$36,733,940	\$1,063,400	\$14,230
PHARMACY	\$55,067,810	\$19,241,480	\$1,027,031,050	\$79,484,190	\$15,133,990	\$201,890
COUNTY INPATIENT	\$6,765,040	\$1,661,030	\$117,796,070	\$21,588,690	\$1,676,450	\$50
COMMUNITY INPATIENT	\$173,209,210	\$26,202,950	\$986,560,020	\$212,795,510	\$20,830,690	\$180,130
NURSING FACILITIES	\$390,358,460	\$26,353,630	\$636,596,660	\$1,956,680	\$1,791,275,200	\$7,478,090
ICF-DD	\$310,280	\$10,463,320	\$187,989,150	\$850,100	\$16,110,370	\$3,437,050
MEDICAL TRANSPORTATION	\$17,136,080	\$5,647,290	\$68,033,490	\$4,955,720	\$4,577,220	\$153,520
OTHER SERVICES	\$138,537,180	\$12,992,470	\$490,437,780	\$37,241,210	\$66,721,100	\$360,980
HOME HEALTH	\$83,340	\$12,280,700	\$88,136,010	\$3,710,500	\$3,450	\$0
FFS SUBTOTAL	\$905,847,920	\$143,240,810	\$4,601,355,250	\$642,335,210	\$1,931,340,520	\$12,239,690
DENTAL	\$33,812,920	\$2,093,300	\$77,772,310	\$109,068,360	\$4,091,460	\$17,300
TWO PLAN MODEL	\$19,396,610	\$6,124,110	\$453,881,320	\$880,277,390	\$0	\$0
COUNTY ORGANIZED HEALTH SYSTEMS	\$118,426,060	\$12,945,960	\$466,458,630	\$175,580,640	\$264,699,440	\$659,380
GEOGRAPHIC MANAGED CARE	\$5,599,930	\$1,747,520	\$116,676,040	\$159,567,040	\$0	\$0
PHP & OTHER MANAG. CARE	\$60,709,920	\$3,848,030	\$161,816,680	\$9,909,980	\$0	\$0
EPSDT SCREENS	\$0	\$0	\$0	\$17,347,650	\$0	\$0
MEDICARE PAYMENTS	\$1,021,227,540	\$54,302,620	\$1,495,932,210	\$0	\$136,589,360	\$1,743,810
STATE HOSP./DEVELOPMENTAL CNTRS.	\$1,036,340	\$1,951,640	\$78,490,860	\$4,652,760	\$4,284,560	\$766,240
MISC. SERVICES	\$472,616,170	\$29,258,920	\$1,878,856,510	\$1,322,930	\$390	\$0
NON-FFS SUBTOTAL	\$1,732,825,500	\$112,272,120	\$4,729,884,550	\$1,357,726,750	\$409,665,210	\$3,186,730
TOTAL DOLLARS (1)	\$2,638,673,430	\$255,512,930	\$9,331,239,800	\$2,000,061,970	\$2,341,005,740	\$15,426,420
ELIGIBLES ***	390,400	23,900	896,900	1,211,300	47,200	200
ANNUAL \$/ELIGIBLE	\$6,759	\$10,691	\$10,404	\$1,651	\$49,598	\$77,132
AVG. MO. \$/ELIGIBLE	\$563	\$891	\$867	\$138	\$4,133	\$6,428

(1) Does not include Audits & Lawsuits, Recoveries, and Mental Health Services.

*** Eligibles include the estimated impact of eligibility policy changes.

Excluded policy changes: 32. Refer to page following report for listing.

FISCAL YEAR 2006-07 COST PER ELIGIBLE BASED ON NOVEMBER 2006 ESTIMATE

SERVICE CATEGORY	LT-ATD	MN-OAS	MN-AB	MN-ATD	MN-AFDC	MI-C
PHYSICIANS	\$7,367,790	\$54,636,330	\$551,580	\$57,090,230	\$305,060,300	\$35,217,870
OTHER MEDICAL	\$5,680,480	\$73,820,090	\$1,827,620	\$100,503,880	\$436,758,770	\$70,649,500
COUNTY OUTPATIENT	\$303,660	\$4,448,170	\$68,970	\$8,979,140	\$21,126,500	\$2,327,810
COMMUNITY OUTPATIENT	\$1,151,600	\$20,398,570	\$121,930	\$26,968,190	\$113,155,800	\$14,498,670
PHARMACY	\$17,626,600	\$79,961,570	\$660,010	\$85,039,050	\$149,133,180	\$36,408,570
COUNTY INPATIENT	\$13,665,980	\$18,283,020	\$409,070	\$105,348,590	\$179,691,320	\$15,215,360
COMMUNITY INPATIENT	\$33,136,640	\$110,763,710	\$1,561,620	\$241,880,400	\$1,065,489,570	\$104,310,910
NURSING FACILITIES	\$434,413,750	\$195,964,420	\$1,279,130	\$64,875,670	\$18,099,970	\$8,506,480
ICF-DD	\$182,310,310	\$13,640	\$0	\$6,628,020	\$535,620	\$2,654,490
MEDICAL TRANSPORTATION	\$2,550,500	\$12,024,460	\$466,430	\$15,309,910	\$12,681,010	\$1,902,650
OTHER SERVICES	\$12,215,340	\$92,039,850	\$305,240	\$67,041,450	\$95,708,350	\$13,325,940
HOME HEALTH	\$34,410	\$761,870	\$12,660	\$46,269,940	\$7,941,900	\$6,428,990
FFS SUBTOTAL	\$710,457,060	\$663,115,710	\$7,264,270	\$825,934,470	\$2,405,382,280	\$311,447,250
DENTAL	\$1,280,200	\$19,202,940	\$52,040	\$10,382,080	\$258,767,020	\$21,350,930
TWO PLAN MODEL	\$0	\$17,612,190	\$170,180	\$24,354,050	\$1,727,965,670	\$34,993,940
COUNTY ORGANIZED HEALTH SYSTEMS	\$102,283,290	\$65,447,680	\$229,020	\$67,317,610	\$457,548,940	\$19,368,670
GEOGRAPHIC MANAGED CARE	\$0	\$3,168,230	\$0	\$6,222,010	\$192,813,500	\$6,291,590
PHP & OTHER MANAG. CARE	\$0	\$34,574,650	\$94,410	\$21,416,860	\$22,747,850	\$1,892,260
EPSDT SCREENS	\$0	\$0	\$0	\$0	\$40,316,560	\$3,237,800
MEDICARE PAYMENTS	\$33,133,590	\$248,610,270	\$1,865,480	\$160,315,460	\$13,627,660	\$0
STATE HOSP./DEVELOPMENTAL CNTRS.	\$201,462,920	\$88,380	\$235,670	\$1,713,900	\$5,204,160	\$3,024,800
MISC. SERVICES	\$120	\$267,682,840	\$725,430	\$250,138,050	\$3,130,230	\$258,280
NON-FFS SUBTOTAL	\$338,160,120	\$656,387,170	\$3,372,220	\$541,860,020	\$2,722,121,600	\$90,418,260
TOTAL DOLLARS (1)	\$1,048,617,170	\$1,319,502,880	\$10,636,490	\$1,367,794,490	\$5,127,503,880	\$401,865,510
ELIGIBLES ***	14,500	212,600	600	111,400	2,976,200	243,800
ANNUAL \$/ELIGIBLE	\$72,318	\$6,207	\$17,727	\$12,278	\$1,723	\$1,648
AVG. MO. \$/ELIGIBLE	\$6,027	\$517	\$1,477	\$1,023	\$144	\$137

(1) Does not include Audits & Lawsuits, Recoveries, and Mental Health Services.

*** Eligibles include the estimated impact of eligibility policy changes.

Excluded policy changes: 32. Refer to page following report for listing.

FISCAL YEAR 2006-07 COST PER ELIGIBLE BASED ON NOVEMBER 2006 ESTIMATE

SERVICE CATEGORY	MI-A	REFUGEE	OBRA	POV 185	POV 133	POV 100
PHYSICIANS	\$4,265,480	\$514,520	\$30,255,100	\$180,496,800	\$3,646,500	\$4,011,780
OTHER MEDICAL	\$3,451,640	\$718,410	\$37,436,640	\$173,709,160	\$13,771,520	\$6,808,300
COUNTY OUTPATIENT	\$378,950	\$112,530	\$2,991,170	\$6,632,160	\$339,240	\$278,180
COMMUNITY OUTPATIENT	\$1,304,700	\$122,370	\$7,615,830	\$27,977,470	\$2,372,840	\$2,392,880
PHARMACY	\$3,387,180	\$492,020	\$11,568,300	\$14,764,140	\$2,821,440	\$2,876,830
COUNTY INPATIENT	\$2,563,420	\$51,640	\$45,560,410	\$45,456,630	\$669,610	\$980,130
COMMUNITY INPATIENT	\$13,218,210	\$377,330	\$107,147,560	\$360,483,070	\$8,974,480	\$11,524,550
NURSING FACILITIES	\$41,858,200	\$0	\$17,386,330	\$0	\$0	\$0
ICF-DD	\$1,806,990	\$0	\$684,240	\$0	\$0	\$0
MEDICAL TRANSPORTATION	\$358,490	\$17,150	\$3,151,600	\$1,846,080	\$220,250	\$228,480
OTHER SERVICES	\$1,128,690	\$54,500	\$2,138,300	\$7,412,800	\$3,193,440	\$3,515,630
HOME HEALTH	\$33,370	\$680	\$146,410	\$870,640	\$455,410	\$1,095,390
FFS SUBTOTAL	\$73,755,320	\$2,461,140	\$266,081,890	\$819,648,950	\$36,464,720	\$33,712,150
DENTAL	\$380,600	\$953,060	\$107,850	\$156,140	\$7,750,790	\$9,349,200
TWO PLAN MODEL	\$2,162,700	\$789,570	\$0	\$27,510,670	\$57,679,200	\$45,901,000
COUNTY ORGANIZED HEALTH SYSTEMS	\$3,867,190	\$286,940	\$3,850,030	\$14,804,280	\$21,792,060	\$14,113,240
GEOGRAPHIC MANAGED CARE	\$288,960	\$104,950	\$0	\$7,439,410	\$11,703,900	\$8,240,760
PHP & OTHER MANAG. CARE	\$29,290	\$0	\$0	\$1,315,220	\$739,330	\$596,140
EPSDT SCREENS	\$0	\$0	\$0	\$0	\$1,471,000	\$1,092,590
MEDICARE PAYMENTS	\$0	\$0	\$0	\$0	\$0	\$0
STATE HOSP./DEVELOPMENTAL CNTRS.	\$153,990	\$31,900	\$312,050	\$387,350	\$0	\$3,240,480
MISC. SERVICES	\$3,680	\$0	\$0	\$164,590	\$23,450	\$18,400
NON-FFS SUBTOTAL	\$6,886,410	\$2,166,410	\$4,269,930	\$51,777,650	\$101,159,740	\$82,551,800
TOTAL DOLLARS (1)	\$80,641,720	\$4,627,560	\$270,351,820	\$871,426,600	\$137,624,460	\$116,263,950
ELIGIBLES ***	4,000	1,900	71,700	198,100	103,900	85,500
ANNUAL \$/ELIGIBLE	\$20,160	\$2,436	\$3,771	\$4,399	\$1,325	\$1,360
AVG. MO. \$/ELIGIBLE	\$1,680	\$203	\$314	\$367	\$110	\$113

(1) Does not include Audits & Lawsuits, Recoveries, and Mental Health Services.

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FISCAL YEAR 2006-07 COST PER ELIGIBLE BASED ON NOVEMBER 2006 ESTIMATE

SERVICE CATEGORY	TOTAL
PHYSICIANS	\$1,140,291,650
OTHER MEDICAL	\$1,623,804,420
COUNTY OUTPATIENT	\$78,825,320
COMMUNITY OUTPATIENT	\$478,142,320
PHARMACY	\$1,600,899,290
COUNTY INPATIENT	\$577,382,520
COMMUNITY INPATIENT	\$3,478,646,570
NURSING FACILITIES	\$3,636,402,670
ICF-DD	\$413,793,590
MEDICAL TRANSPORTATION	\$151,260,330
OTHER SERVICES	\$1,044,370,270
HOME HEALTH	\$168,265,680
FFS SUBTOTAL	\$14,392,084,620
DENTAL	\$556,588,500
TWO PLAN MODEL	\$3,298,818,590
COUNTY ORGANIZED HEALTH SYSTEMS	\$1,809,679,040
GEOGRAPHIC MANAGED CARE	\$519,863,830
PHP & OTHER MANAG. CARE	\$319,690,630
EPSDT SCREENS	\$63,465,590
MEDICARE PAYMENTS	\$3,167,348,000
STATE HOSP./DEVELOPMENTAL CNTRS.	\$307,038,000
MISC. SERVICES	\$2,904,200,000
NON-FFS SUBTOTAL	\$12,946,692,190
TOTAL DOLLARS (1)	\$27,338,776,810
ELIGIBLES ***	6,594,100
ANNUAL \$/ELIGIBLE	\$4,146
AVG. MO. \$/ELIGIBLE	\$345

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Excluded policy changes: 32. Refer to page following report for listing.

FISCAL YEAR 2006-07 COST PER ELIGIBLE BASED ON NOVEMBER 2006 ESTIMATE

EXCLUDED POLICY CHANGES: 32

1	FAMILY PLANNING INITIATIVE
2	BREAST AND CERVICAL CANCER TREATMENT
4	CHDP GATEWAY - PREENROLLMENT
5	BRIDGE TO HFP
8	MEDI-CAL/HF BRIDGE PERFORMANCE STANDARDS
9	MEDI-CAL TO HFP ACCELERATED ENROLLMENT
10	BCCTP RETROACTIVE COVERAGE
12	HURRICANE KATRINA SECTION 1115 WAIVER
35	CDSS SHARE OF COST PAYMENT FOR IHSS
46	FAMILY PACT DRUG REBATES
74	HOSP FINANCING - DSH PMT
75	HOSP FINANCING - SAFETY NET CARE POOL
76	HOSP FINANCING - PRIVATE DSH REPLACEMENT
77	HOSP FINANCING - PRIVATE HOSPITAL SUPP PMT
78	HOSP FINANCING-DPH PHYSICIAN & NON-PHYSICIAN
79	HOSP FINANCING - CCS AND GHPP
80	HOSP FINANCING - DISTRESSED HOSPITAL FUND
82	HOSP FINANCING - NDPH SUPPLEMENTAL PMT
83	HOSP FINANCING - HEALTH CARE COVERAGE
85	HOSP FINANCING - STABILIZATION FUNDING
87	BASE ADJUSTMENT - DPH INTERIM RATE
90	CAPITAL PROJECT DEBT REIMBURSEMENT
91	HOSPITAL OUTPATIENT SUPPLEMENTAL PAYMENT
92	IGT FOR NON-SB 1100 HOSPITALS
93	FFP FOR LOCAL TRAUMA CENTERS
94	CERTIFICATION PAYMENTS FOR DP-NFS
95	DSH OUTPATIENT PAYMENT METHOD CHANGE
96	SRH OUTPATIENT PAYMENT METHOD CHANGE
97	DSH PAYMENTS
109	MEDI-CAL TCM PROGRAM (Misc. Svcs.)
110	HEALTHY FAMILIES - CDMH
114	MINOR CONSENT SETTLEMENT